		DECLARATION FO	R PATENT APPLICATION AND I onal Applications)	POWER OF ATTORNEY	ATTORNEY'S DOCKET NUMBER		
As a below named inventor, I hereby declare that:							
	My residence, post office address and citizenship are as stated below next to my name.						
		believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
	Particles having a functional multilayer structure						
	the specification of which (check only one item below):						
is attached hereto.							
	was filed as United States application Serial No						
		on					
	and was amended						
	on (if applicable).						
	\boxtimes						
		Number PCT/EP2005/000370					
on 15.01.2005,							
and was amended under PCT Article 19							
on (if applicable).							
		tate that I have reviewed by any amendment refer	d and understand the contents of the abored to above.	ve-identified specification, includir	ig the claims, as		
	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim priority benefits under Title 35, United States Code, § 119 or 365 (b) of the following United States provisional application(s) and of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:							
PRIO	R U.S. PRO	VISIONAL AND FOREIG	N/PCT APPLICATION(S) AND ANY PRIO	RITY CLAIMS UNDER 35 U.S.C. 119:			
	(if PCT	COUNTRY , indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119		
Gern	nany		10 2004 006 145.9	07.02.2004	YES NO		
					YES NO		
					YES NO		
					YES NO		
POWER OF ATTORNEY: As a named inventor, I hereby appoint I. William Millen (19,544); John L. White (17,746); Anthony J. Zelano (27,969); Alan E.J. Branigan (20,565); John R. Moses (24,983); Harry B. Shubin (32,004); Brion P. Heaney (32,542); Richard J. Traverso (30,595); John A. Sopp (33,103); Richard M. Lebovitz (37,067); James E. Ruland (37,432); Nancy Axelrod (44,014); Jennifer J. Branigan (40,921); Robert E. McCarthy, (46,044); Jonathan G. Brown (47,451); and Csaba Henter (50,908) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.							
Sen	d Correspon	ndence to:Customer No. 2	23599 Telephone No. 703/243-6333	Direct Telephor	e Calls to:		
23599							

PATENT TRADEMARK OFFICE

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

		·			
2	FULL NAME OF INVENTOR Hennemann		FIRST GIVEN NAME Alfred	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	Brombachtal	STATE OR FOREIGN COUNTRY DE	COUNTRY OF CITIZENSHIP DE	
	POST OFFICE ADDRESS	STREET Am Sonnenberg 23	CITY Brombachtal	STATE & ZIP CODE/COUNTRY 64753 Brombachtal	
2	FULL NAME OF INVENTOR Entenmann		FIRST GIVEN NAME Marc	SECOND GIVEN NAME	
0 2	RESIDENCE & CITIZENSHIP	CITY Fellbach	STATE OR FOREIGN COUNTRY DE	COUNTRY OF CITIZENSHIP DE	
	POST OFFICE ADDRESS Am Sandgraben 13		CITY Fellbach	STATE & ZIP CODE/COUNTRY 70734 Fellbach	
2	FULL NAME OF INVENTOR FAMILY NAME Müller		FIRST GIVEN NAME Margarete	SECOND GIVEN NAME	
0 3	RESIDENCE & CITIZENSHIP	CITY Münster	STATE OR FOREIGN COUNTRY DE	COUNTRY OF CITIZENSHIP DE	
	POST OFFICE ADDRESS	STREET Auf der Beune 8	Münster	STATE & ZIP CODE/COUNTRY 64389 Münster	
2	FULL NAME OF INVENTOR Bonn-Walter		FIRST GIVEN NAME Renate	SECOND GIVEN NAME	
0 4	RESIDENCE & CITIZENSHIP	CITY Darmstadt	STATE OR FOREIGN COUNTRY DE	COUNTRY OF CITIZENSHIP DE	
	POST OFFICE STREET ADDRESS Buchenlandweg 38		CITY Darmstadt	STATE & ZIP CODE/COUNTRY 64295 Darmstadt	
2	FULL NAME OF INVENTOR Huber		FIRST GIVEN NAME Adalbert	SECOND GIVEN NAME	
0 5	RESIDENCE & CITIZENSHIP	CITY Bensheim	STATE OR FOREIGN COUNTRY DE	COUNTRY OF CITIZENSHIP DE	
	POST OFFICE ADDRESS	STREET Bonnhoeferstrasse 9	CITY Bensheim	STATE & ZIP CODE/COUNTRY 64625 Bensheim	
2	FULL NAME OF INVENTOR	FAMILY NAME Schoenefeld	FIRST GIVEN NAME Ulrich	SECOND GIVEN NAME	
0 6	RESIDENCE & CITIZENSHIP	CITY Bickenbach	STATE OR FOREIGN COUNTRY DE	COUNTRY OF CITIZENSHIP DE	
	POST OFFICE ADDRESS Bahnhofstrasse 61		CITY Bickenbach	STATE & ZIP CODE/COUNTRY 64404 Bickenbach	
2	FULL NAME OF INVENTOR FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN NAME	
0 7	RESIDENCE & CITIZENSHIP	СПҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

				<u>, , _ </u>
2 0 8	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
2 0 9	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 1	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
1 2	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	СІТУ	STATE & ZIP CODE/COUNTRY
			<u> </u>	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE	SIGNATURE OF INVENTOR 207	DATE
il. Muzemons	08.06.2006		
SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
Cler (MC	08.06.2006		
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
W. Wille	08.06.2006		
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
R. Bock-Cult	08.06.2006		
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
n. ll	08.06.2006		
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE
M. Cham feld	08.06.2006		